

**FEC  
FORM 3**

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

SECRETARY OF SENATE  
15 FEB - 2015

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT ▼**

Example: If typing, type over the lines.

12FE4M5

BOB MARSHALL FOR SENATE, INC.

ADDRESS (number and street)

7930 WILLOW POND COURT



Check if different than previously reported. (ACC)

MANASSAS

VA

20111

2. **FEC IDENTIFICATION NUMBER ▼**

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C C00511956

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

VA

00

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y Y

in the State of

(c) 30-Day **POST**-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y Y

10 / 01 / 2014

through

M M / D D / Y Y Y Y Y

12 / 31 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mary Rose Lalli

Signature of Treasurer Mary Rose Lalli

Mary Rose Lalli

Date

M M / D D / Y Y Y Y Y

01 / 30 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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